# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### **TEMPORARY**

# FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR VIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number 3235-0076 Expires: March 15, 2009

16.00

Estimated average burden

SEC Processing Section

hours per response .......

MAR 16 2009

Washington, DC

					127	
Name of Offering ( check if this is an a Private Advisors Hedged Equity F		e has changed, and	indicate change.)		1 500 700 700 700 700 700 700 700 700 700	
Filing Under (Check box(es) that apply):  Type of Filing: New Filing	Rule 504 Amendment	Rule 505	⊠ Rule 506	Section 4(6)	ULOE	
	A. BAS	SIC IDENTIFICA	TION DATA			
1. Enter the information requested about	the issuer					
Name of Issuer ( check if this is an ame Private Advisors Hedged Equity F		as changed, and ind	cate change.)			
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 1800 Bayberry Court, Suite 300, Richmond, VA 23226 804-289-6000						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)  Prior Description of Business Private Investment Fund						
Brief Description of Business Private In	vestment Fund	••		rku	CEGGED	
	artnership, already for artnership, to be for		ner (please specify)	•	0 9 2009	
		Month Year		THUMBU	NA KEUIEKO	
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizati	on: (Enter two-1	10 01 0 etter U.S. Postal Sea ada; FN for foreign	vice abbreviation	Estimated for State:  DE		

#### GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
Each promoter of the issuer, if the issuer has been organized within the past five years;
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities
the issuer;
· Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Private Advisors, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
1800 Bayberry Court, Suite 300, Richmond, VA 23226
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Moelchert, Louis W. Jr.
Business or Residence Address (Number and Street, City, State, Zip Code)
1800 Bayberry Court, Suite 300, Richmond, VA 23226
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Astruc, Rafael
1800 Bayberry Court, Suite 300, Richmond, VA 23226
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Johnson III, Charles M.
Business or Residence Address (Number and Street, City, State, Zip Code)
1800 Bayberry Court, Suite 300, Richmond, VA 23226
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Moelchert III, Louis W. "Chip"
Business or Residence Address (Number and Street, City, State, Zip Code) 1800 Bayberry Court, Suite 300, Richmond, VA 23226
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

_		······································			]	B. INFOR	MATION	ABOUT	OFFERI	NG		<del></del> _		<del></del>
1.	Has the issu	er sold, or	does the is	suer inten	d to sell, to	non-accr	edited inve	estors in th	is offering	?			••••	Yes No
				Answ	er also in A	Appendix,	Column 2.	, if filing u	nder ULO	E.				
						-	-			***************************************	**********	••••••		\$ <u>1,000,000</u> *
_	*(the General				-									
3.	Does the off	ering pern	nit joint ow	mership o	f a single u	ınit?			***************************************	***************************************	****************	• • • • • • • • • • • • • • • • • • • •	••••••••	Yes No
4.	remuneratio person or ag than five (5) dealer only.	n for solic ent of a b persons t	itation of proker or deto be listed	ourchasers caler regis are assoc	in connectered with	tion with the SEC a	sales of se ind/or with	curities in a state or	the offering states, lis	ng. If a po t the name	rson to be of the bro	e listed is a oker or dea	on or similar an associated aler. If more hat broker or	
	! Name (Last i hith Barney A													
Bus	siness or Resid	lence Add	ress (Numl	per and St			Code)							
	me of Associa			nts				-						
	tes in Which F				ntends to S	Solicit Pur	chasers						<del></del>	
	(Check	"All State	es" or checl	k individu	al States)				***********		*******		***************	🛛 All States
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	siness or Resid					State, Zip	Code)	·						
	me of Association		or Dealer	<u></u>	<del></del>			<del></del>	.,		· <u></u>			
Sta	tes in Which P	erson List	ed Has Sol	icited or I	ntends to S	Solicit Pure	chasers							
	(Check "All	States" or	check indi	vidual Sta	tes)	*************	•••••••	************	·····		••••	•••••••••••		🛛 All States
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	l Name (Last r own, Alex	name first,	if individu	ıal)	-				<del></del>				<u></u>	
	siness or Resid 9 New York					State, Zip	Code)							
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Stat	tes in Which P	erson List	ed Has Sol	icited or I	ntends to S	Solicit Purc	chasers							
	(Check	"All State	s" or check	individu	al States)	•••••	************		••••••		***********	***************************************	***************************************	🛛 All States
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[wa]	[wvj	[wɪ]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE	S AND USE OF PROCEE	DS
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$ 100,000,000,000(a)	
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$	\$
Limited Partnership Interests	_	
	\$	\$
Other (Specify)	\$	\$
Total	\$_100,000,000,000 (a)	\$59,325,917
Answer also in Appendix, Column 3, if filing Under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$ 59,325,917
Non-accredited Investors	0	\$
Total (for filings Under Rule 504 only)		\$
Answer also in Appendix, Column 4 if filing under ULOE		
3. If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		
Legal Fees	🛛	\$40,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (Specify finder's fees separately) *Paid on a quarterly fees collected	basis out of management	\$144,993
Other Expenses (identify) _Travel & Marketing		\$20,000
Other Emperiors (rectifif) Traver & Marketing		a 20.000
Total		\$

	to Part C - Question 1 and total expenses furnished in Question 4.a. This difference is the "adjusted gross procedure."	response to Part C -			\$ <u>99,999,79</u> 2	2 <u>,507</u>
5.	Indicate below the amount of the adjusted gross proceeds proposed to be used for each of the purposes shown. I purpose is not known, furnish and estimate and check the estimate. The total of the payments listed must equal proceeds to the issuer set forth in response to Part C - Que	f the amount for any box to the left of the al the adjusted gross		Payments to Officers, Directors, & Affiliates	Payment Other	
	Salaries and fees	***************************************	□ \$_		□ \$	
	Purchase of real estate		□ \$_		<b>\$</b>	
	Purchase, rental or leasing and installation of machinery a	and equipment	□ \$_		<b>S</b>	
	Construction or leading of plant buildings and facilities	•••••	□ \$_		□ \$	
	Acquisition of other businesses (including the value of involved in this offering that may be used in exchange for securities of another issuer pursuant to a merger)	or the assets	□ \$_		<b></b> \$	
	Repayment of indebtedness		□ \$		🗆 \$	
	Working capital					
	Other (specify) Investment in underlying funds and expenses		☐ \$_		⊠ \$ <u>99,999.</u>	792,507
	Column Totals		□ \$_	<del></del>	⊠ \$ <u>99,999.</u>	792,507
	Total Payments Listed (column totals added)	••••••	☒		\$ <u>99,999</u> ,	792,507
	D. FEDER	AL SIGNATURE	'			·
follow	ssuer has duly caused this notice to be signed by the unders ving signature constitutes an undertaking by the issuer to it st of its staff, the information furnished by the issuer to any r	furnish to the U.S. Sec	urities	and Exchange Con	imission, upon	505, the written
	te Advisors Hedged Equity Fund (QP), L.P.	Signature H	7	> Date 3/12	109	
	of Signer (Print or Type) s J. Shannon	Title of Signer (Print General Partner of the	or Ty Issue	pe) Partner, Pr	vate Advisors	, LLC,

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

F	STATE SIGNATURE
1. Is any party described in 17 CFR 230.252(c), (d). (e) or (f)	) presently subject to any of the disqualifications provisions Yes No
See Append	tix, Column 5, for state response.
2. The undersigned issuer hereby undertakes to furnish to an (17 CFR 239.500) at such times as required by state law.	ny state administrator of any state in which this notice is filed, a notice on Form D NOT APPLICABLE
<ol><li>The undersigned issuer hereby undertakes to furnish to the offerees. NOT APPLICABLE</li></ol>	ne state administrators, upon written request, information furnished by the issuer to
	iar with the conditions that must be satisfied to be entitled to the Uniform limited notice is filed and understands that the issuer claiming the availability of this ions have been satisfied. NOT APPLICABLE
The issuer has read this notification and knows the contents to duly authorized person.	be true and has duly caused this notice to be signed on its behalf by the undersigned
Issuer (Print or Type) Private Advisors Hedged Equity Fund (QP), L.P.	Signature Date 2/2/04
Name of Signer (Print or Type)  James J. Shannon	Title (Print or Type) Partner, Private Advisors, LLC, General Partner of the Issuer



#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.